

SPECIALTY MENTAL HEALTH FACILITIES

RIMROCK FOUNDATION SMH

1231 N 29TH ST PO BOX 30347
BILLINGS MT 59101-
Phone: 248-3175 **Fax:** 248-3821
Administrator DAVID CUNNINGHAM
License Number: **10692** Exp. Date: **03/31/2009**
Health Planning Region Number: 3

Facility ID Number: **117**
County: **YELLOWSTONE**
CARF: X
Licensed Beds: **15**
NOT PROV
Current License Duration: **3**
Original License Date:

ROCKY MOUNTAIN TREATMENT CENTER SMH

920 4TH AVE N
GREAT FALLS MT 59401-
Phone: 727-8832 **Fax:** 727-8172
Administrator MONTY KUKA
License Number: **9565** Exp. Date: **05/28/2006**
Health Planning Region Number: 2

Facility ID Number: **118**
County: **CASCADE**
CARF:
Licensed Beds: **8**
NOT PROV
Current License Duration: **3**
Original License Date:

2 Total Facilities =